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Abstract
Based on data from the 2008/2009 Canadian Community Health Survey–Healthy Aging, this study examines the characteristics of people aged 45 or older who reported caring for a senior. It also describes the nature of the care provided and the positive and negative aspects of caregiving. More than one-third (35%) of Canadians aged 45 or older reported caring for a senior with a short- or long-term health condition or limitation. Compared with non-caregivers, those providing care to a senior were more likely to be women. They tended to be younger and more likely to live in higher-income households and to be postsecondary graduates. More than half the people receiving care were parents or parents-in-law, and they usually did not live with the caregiver. The most common form of care provided was transportation. A third of caregivers had been providing assistance for at least five years. Virtually all (95%) of them reported positive aspects of caregiving, but more than half (56%) experienced challenges and difficulties.

Keywords
Aged, caregiving, elderly, geriatrics, social support

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As Canadians age, informal caregiving becomes increasingly important to the well-being of seniors. According to the 2008/2009 Canadian Community Health Survey (CCHS)–Healthy Aging, an estimated 3.8 million Canadians who were aged 45 or older (35%) were providing informal care to a senior with a short- or long-term health condition. Informal caregivers—family and friends who provide unpaid assistance with tasks such as transportation and personal care—help seniors remain in their homes, thereby reducing demands on the health care system.[1] Moreover, remaining in one's home is usually the preference of seniors themselves.[2,3]

Caring for someone with a health condition or limitation, particularly cognitive impairments such as Alzheimer's disease and dementia, can cause physical and emotional problems and create financial and social burdens for the caregiver.[2,4-7] This may be especially true for caregivers who, themselves, are seniors.[8] On the other hand, providing care can give individuals pleasure and pride, enhance their self-worth, and help them to build relationships with the care recipient.[9]

Based on data from the 2008/2009 CCHS–Healthy Aging, this study compares the characteristics of caregivers with those of their contemporaries who are not caregivers (see *The data*). In addition, the characteristics of the care that caregivers provide are outlined, as are the positive and negative aspects of caregiving.

Caregivers

In 2008/2009, women made up just over half (57%) of people aged 45 or older who were providing care to a senior (Table 1). Almost three-quarters (73%) of these caregivers were aged 45 to 64, although a quarter were seniors themselves; in

The data

The data are from the 2008/2009 Canadian Community Health Survey (CCHS)–Healthy Aging, a cross-sectional survey about factors that contribute to healthy aging. Information was collected from 30,865 people aged 45 or older living in private occupied dwellings in the ten provinces. The survey excluded full-time members of the Canadian Forces and residents of the three territories, Indian reserves or Crown lands, institutions and some remote regions.

This study deals with people who reported that they provided care to a senior with a short- or long-term condition or limitation. Respondents who primarily provided care to someone younger than age 65 were excluded from this analysis. Some respondents reported caring for more than one person. The questions pertained to the person to whom, in the past 12 months, the caregiver had dedicated the most time and resources. It is possible that the caregiver who responded to the survey was not the only one providing care to that person.

Among caregivers, 11.4% were also receiving care. These respondents were included in the sample for this study, although subsequent analyses suggested that excluding them would not alter the results. The analysis represents caregivers, not care recipients; the information on care recipients is not representative of all Canadians aged 65 or older who receive care.

Descriptive statistics were used to compare caregivers with non-caregivers. Sampling weights were used in all analyses. To account for the complex survey design, a bootstrapping technique was applied for variance estimation.[10]

Caregivers were classified by age group: 45 to 54, 55 to 64, 65 to 74, and 75 or older. Their marital status was classified as married/common-law or widowed/separated/divorced/single. Household income deciles were derived by calculating the ratio between the total household income and Statistics Canada's low-income cutoff (LICO) specific to the number of people in the household, the size of the community, and the survey year. Their highest educational attainment was categorized as: less than secondary graduation, secondary graduation/some postsecondary, and postsecondary graduation. Employment data were collected only from respondents younger than age 75. Employment status was based on whether the respondent had worked in the past year.

Caregivers' self-perceived health was based on the question, "In general, would you say your health is: ...." Response options were: excellent, very good, good, fair or poor. Those with excellent or very good health were defined as having high self-perceived health, and those with good, fair or poor health were defined as having lower self-perceived health. A similar question was used for self-perceived mental health. Both self-perceived physical and mental health were age-standardized to account for the uneven distribution within the age categories.

The characteristics of care recipients examined in this study are age (65 to 74, 75 to 84, and 85 or older), relationship to caregiver (for example, spouse, parent or child), residence (same household, other household or institution), and nature of their health condition (short-term, long-term, other). The CCHS–Healthy Aging did not collect data on care recipients' specific health conditions.

The characteristics of the care provided are the type (transportation, help with housework, personal care, meals and other), duration (less than one year to five or more years), frequency (daily, less than daily, occasionally or rarely), and whether providing care had affected the caregiver's health.

Based on a list of response options, caregivers were asked about the positive and negative aspects of providing care.

fact, 10% of them were aged 75 or older. Even so, the age profile of caregivers was younger, compared with non-caregivers (who included care recipients), 18% of whom were 75 or older.

Perhaps reflecting their younger age profile, caregivers were more likely than non-caregivers to be married or in a common-law relationship (78% versus 71%). They were also more likely to have a higher household income and to be postsecondary graduates. Among those aged 45 to 74, caregivers were less likely than non-caregivers to have been employed in the past year.

Self-perceived health has been shown to be a reliable measure of general health status.[11] Higher percentages of caregivers than non-caregivers reported very good or excellent physical and mental health. Nonetheless, it is possible that some degree of self-selection is operating. That is, healthier people may be more capable of being caregivers, and so, more likely to undertake the task. In multivariate analyses that controlled for sex, age, household income and educational attainment, associations between high self-perceived physical and mental health and being a caregiver were no longer significant (data not shown).

Care recipients

Around three-quarters of caregivers reported that the person whom they assisted was at least 75 years old; one-third were caring for a senior aged 85 or older (Table 2).

Parents and parents-in-law made up more than half (56%) of those receiving informal care. Another 19% of caregivers reported assisting a friend or neighbour, and 11% were caring for a spouse.

Relatively few care recipients (14%) actually lived with the caregiver. A substantial majority (70%) of these care recipients were living in another private household, and 12% were in a health care institution.

Caregiving duties

Transportation was the most common form of care provided, reported by 39% of caregivers. About 20% were assisting with household activities, and around 15%, with personal care.

Although 57% of caregivers described their provision of care as "regular," this was a daily commitment for only 21% of them; 36% provided regular care once a week, once a month, or less than once a month. About a third of caregivers had been providing care for at least five years; almost as many reported that they had been doing so for less than a year.

The literature suggests that those who care for someone with severe cognitive impairment are at elevated risk of experiencing caregiver stress or burden,[12] but because the CCHS did not ask about the care recipients' specific health condition, this issue could not be addressed in the current study.

Table 1
Percentage distribution of selected characteristics of caregivers and non-caregivers, household population aged 45 or older, Canada excluding territories, 2008/2009

	Caregiver			Non-caregiver		
		95% confidence interval			95% confidence interval	
	%	from	to	%	from	to
Total	100.0	...	...	100.0	...	...
Sex						
Men	43.2	41.3	45.1	50.1	49.0	51.2
Women	56.8	54.9	58.7	49.9	48.8	51.0
Age group						
45 to 54	39.8	37.7	42.0	35.9	34.6	37.2
55 to 64	32.8	31.2	34.4	26.5	25.6	27.4
65 to 74	17.1	16.1	18.0	19.2	18.6	19.8
75 or older	10.3	9.6	11.1	18.4	17.9	19.0
Marital status						
Married/Common-law	77.9	76.3	79.4	71.3	70.0	72.5
Widowed/Separated/Divorced/Single	22.1	20.6	23.7	28.7	27.5	30.0
Household income decile						
1 (lowest)	5.7	5.0	6.5	12.9	11.9	14.0
2	8.1	7.2	9.2	11.5	10.6	12.4
3	9.4	8.3	10.7	10.7	9.9	11.6
4	10.2	9.0	11.6	10.5	9.6	11.5
5	10.5	9.2	12.1	9.8	8.8	10.9
6	11.1	9.9	12.6	9.2	8.2	10.3
7	10.2	9.0	11.6	8.9	7.9	10.0
8	11.0	9.4	12.8	9.5	8.3	10.9
9	12.3	10.6	14.1	8.9	7.9	10.1
10 (highest)	11.4	10.0	13.0	8.0	7.0	9.1
Education						
Less than secondary graduation	16.3	15.0	17.8	27.7	26.4	28.9
Secondary graduation or some postsecondary	25.2	23.7	26.9	24.9	23.5	26.3
Postsecondary graduation	58.4	56.5	60.3	47.5	45.8	49.1
Employment status[†]						
Not employed in past year	68.8	66.9	70.5	65.3	63.9	66.8
Employed in past year	31.2	29.5	33.1	34.7	33.2	36.1
Self-perceived physical health[‡]						
Excellent/Very good	58.0	55.9	60.0	53.2	51.4	54.9
Good/Fair/Poor	42.0	40.0	44.1	46.8	45.1	48.6
Self-perceived mental health[‡]						
Excellent/Very good	76.6	74.7	78.3	72.2	70.7	73.7
Good/Fair/Poor	23.4	21.7	25.3	27.8	26.3	29.3

† respondents aged 45 to 74
‡ age-standardized to account for uneven distribution within age categories
... not applicable
Source: 2008/2009 Canadian Community Health Survey–Healthy Aging

Table 2
Percentage distribution of characteristics of care recipient and care provided, household population aged 45 or older, Canada excluding territories, 2008/2009

		95% confidence interval	
	%	from	to
Care recipient	100.0	...	...
Age group			
65 to 74	21.6	20.0	23.3
75 to 84	45.9	43.9	47.9
85 or older	32.5	30.6	34.6
Relationship to caregiver			
Parent/Parent-in-law	55.8	54.0	57.7
Friend/Neighbour/Other	19.2	17.8	20.7
Spouse/Common-law partner	10.5	9.5	11.6
Other relative	9.7	8.7	10.7
Child (older than age 65)	4.8	3.9	6.0
Residence			
Another household	69.6	67.7	71.4
Same household	13.6	12.3	15.0
Health care institution	12.0	10.9	13.3
Deceased†	4.8	4.1	5.6
Health condition			
Short-term	13.4	11.0	16.2
Long-term	83.5	80.7	86.0
Other	3.1	2.4	4.1
Care provided	100.0	...	...
Type			
Transportation	38.8	36.7	40.9
Help with activities such as housework	20.5	18.9	22.3
Personal care	15.5	14.1	17.1
Meal preparation and delivery	11.2	9.9	12.7
Other	14.0	12.6	15.5
Frequency			
Regular (daily)	21.1	19.4	23.0
Regular (less than daily)	35.5	33.5	37.6
Occasionally/Rarely	43.4	41.2	45.5
Duration			
Less than 1 year	30.2	28.1	32.5
1 to less than 3 years	21.5	19.9	23.2
3 to less than 5 years	13.8	12.5	15.2
5 or more years	34.5	32.5	36.5

† person cared for in past 12 months was deceased at time of survey
... not applicable
Source: 2008/2009 Canadian Community Health Survey–Healthy Aging

Challenges and rewards

Although a relatively small percentage of informal caregivers reported that caregiving had caused or worsened a health problem (8%), more than half (56%) of them encountered difficulties and challenges (Table 3). When they were asked about the most negative aspect of caregiving, 17% reported that it was emotionally demanding; 12% said that because of caregiving, they did not have enough time for themselves or family; 10% said it created stress; and 7% reported fatigue.

At the same time, almost all (95%) informal caregivers reported positive aspects: 30% said that the most positive aspect of caregiving was personal satisfaction; 26% enjoyed providing assistance; and 19% stated that it made them feel closer to the care recipient.

Table 3
Percentage distribution of negative and positive aspects of caregiving, household population aged 45 or older, Canada excluding territories, 2008/2009

		95% confidence interval	
	%	from	to
Caregiving caused/worsened caregiver's health condition	**100.0**	...	...
Yes	7.8	6.7	9.0
No	92.2	91.0	93.3
Most negative aspect	**100.0**	...	...
Emotionally demanding	17.4	15.9	18.9
Not enough time for self/family	12.0	10.5	13.5
Creates stress	9.5	8.2	11.1
Fatigue	6.6	5.5	7.8
Affects family/other relationships	2.4	1.8	3.2
Interferes with work	1.9[E]	1.4	2.7
Conflicts with social life	0.9[E]	0.6	1.3
Financial burden	0.5[E]	0.3	0.8
Other	4.5	3.6	5.5
Did not experience difficulties	44.4	42.2	46.6
Most positive aspect	**100.0**	...	...
Personal satisfaction	30.4	28.3	32.5
Enjoy providing assistance	25.8	23.9	27.8
Closer to care recipient	18.7	17.2	20.4
Feel needed	16.4	14.8	18.0
Other	3.8	3.0	4.7
No positive aspects	5.0	3.7	6.6

[E] use with caution
... not applicable
Source: 2008/2009 Canadian Community Health Survey–Healthy Aging

Conclusion

In 2008/2009, about one-third of Canadians aged 45 or older were providing care to a senior with a short- or long-term health condition or limitation. Among the negative aspects of caregiving that they reported were that it was emotionally demanding and that it meant they did not have enough time for themselves or their family. On the other hand, substantial numbers reported that they derived personal satisfaction from caregiving and enjoyed providing assistance.

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